Fill in this information to ident	ify the case:				
Debtor name Absolute Hor	me Health, LLC			_	
United States Bankruptcy Court	for the: NORTHERN DIST	RICT OF ILLINOIS			
Case number (if known) 23-03559					
, <u>25 55</u>					
					amended filing
Official Form 207					
Statement of Finan	cial Affairs for N	on-Individu	als Filing for Bar	nkruntev	04/2
The debtor must answer every write the debtor's name and ca	question. If more space is				
Part 1: Income					
Gross revenue from busine	ss				
□ None.					
	d		0		2
which may be a calendar	d ending dates of the debto year	or's fiscal year,	Sources of revenue Check all that apply		Gross revenue (before deductions and exclusions)
	the fiscal year to filing o	ng date: Operating a business			\$118,653.37
From 1/01/2023 to Filing	g Date		☐ Other		
For prior year:	/0000		Operating a business		\$903,575.80
From 1/01/2022 to 12/31	/2022		☐ Other		
For year before that:	/2024		Operating a business		\$1,210,874.88
From 1/01/2021 to 12/31	72021		☐ Other		
Non-business revenue Include revenue regardless or and royalties. List each source					ney collected from lawsuits
_	C	, ,			
■ None.					
			Description of sources of	f revenue	Gross revenue from each source (before deductions and exclusions)
Part 2: List Certain Transfer	rs Made Before Filing for B	ankruntov			,
3. Certain payments or transfer	-		in ann		
List payments or transfers—in filing this case unless the agg and every 3 years after that w	cluding expense reimbursem pregate value of all property to	entsto any creditor ransferred to that cre	r, other than regular employe editor is less than \$7,575. (Th		
■ None.					
Creditor's Name and Add	ress	Dates	Total amount of value	Reasons for Check all th	or payment or transfer at apply

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider
List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed

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or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. Insiders include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and their relatives; and anyone agent of the debtor, 11 LLS C. 8 101(31)

	debioi	and their relatives, anniates of the depto	or and insiders of such allii	lates, and any managing agent or	the debtor. 11 0.5.0	J. 9 101(31).
	■ No	one.				
		ler's name and address tionship to debtor	Dates	Total amount of value	Reasons for pay	ment or transfer
5.	Repossessions, foreclosures, and returns List all property of the debtor that was obtained a foreclosure sale, transferred by a deed in lied					ed by a creditor, sold at
	■ No	one				
	Cred	litor's name and address	Describe of the Prope	rty	Date	Value of property
6.		s y creditor, including a bank or financial in debtor without permission or refused to r				
	■ No	one				
	Cred	litor's name and address	Description of the act		Date action was taken	Amount
7.	List the	Case title	ns, arbitrations, mediation	s, and audits by federal or state a	gencies in which the	
	7.1.	Case number Poett v. Absolute Home Health, LLC 22-sc-208	Contract	address Circuit Court of 13th Judicial Circuit 111 E Washington St Morris, IL 60450	☐ Pending☐ On appe☐ Conclud	eal
	7.2.	Home Therapeutic Staffing v. Absolute Home Health 22-m1-120939	Contract	Circuit Court of Cook County, IL Richard J. Daley Center 50 East Washington Chicago, IL 60602	■ Pending □ On appe	eal
	7.3.	Absolute Home Health, LLC v. Hyder 21-L-008973	Breach of contract, fraud	Circuit Court of Cook County, IL Richard J. Daley Center 50 East Washington Chicago, IL 60602	■ Pending □ On appe	eal
	7.4.	Capital Dude LLC v. Absolute Home Health LLC, et al. 533072/2022	Contract	Kings County, NY Supren Court 360 Adams St Brooklyn, NY 11201	ne Pending On appe	eal

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

Case 23-03559 Doc 21 Filed 03/30/23 Entered 03/30/23 16:00:45 Desc Main Document Page 3 of 8 Debtor Case number (if known) 23-03559 Absolute Home Health, LLC ■ None Part 4: Certain Gifts and Charitable Contributions List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000 ■ None Recipient's name and address Description of the gifts or contributions **Dates given** Value **Narvick Home** Christmas presents 1037 Armstrong St. 12/2021 \$2,500.00 Morris, IL 60450 Recipients relationship to debtor Part 5: Certain Losses 10. All losses from fire, theft, or other casualty within 1 year before filing this case. ■ None Description of the property lost and Amount of payments received for the loss Dates of loss Value of property how the loss occurred lost If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received. List unpaid claims on Official Form 106A/B (Schedule A/B: Assets - Real and Personal Property). None to date Unknown Debtor is auditing records relating to theft involving past employee, amount stolen exceeds \$20k Part 6: Certain Payments or Transfers 11. Payments related to bankruptcy List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case. ☐ None.

	Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1.	FactorLaw 105 W. Madison St., Suite 1500 Chicago, IL 60602	Debtor's president, Stori Worth, paid FactorLaw a total fo \$1,000.00, as partial payment towards \$1,738.00 (apiece) filing fees for this and related case; all compensation to be applied-for	3/15/23	\$1,000.00
	Email or website address			
	Who made the payment, if not debtor	?		

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

1

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Debtor Absolute Home Health, LLC Page 4 of 8

Case number (if known) 23-03559

Do not	include transfers already listed on this s	tatement.				
■ No	ne.					
Nam	e of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value		
List any 2 years	13. Transfers not already listed on this statement List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.					
■ No	ne.					
	Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value		
Part 7:	Previous Locations					
	us addresses previous addresses used by the debtor v	within 3 years before filing this case and the dates the	e addresses were u	sed.		
☐ Do	es not apply					
	Address		Dates of occu From-To	upancy		
14.1.	10604 SW Highway, Suite 104 Chicago Ridge, IL 60415		1/19 - 11/19			
14.2.	425 W. Rt. 6 Suite H Morris, IL 60450		11/19 - 3/21			
15. Health Is the d	Health Care Bankruptcies Care bankruptcies lebtor primarily engaged in offering serviosing or treating injury, deformity, or dise					
	ding any surgical, psychiatric, drug treatn					
:	No. Go to Part 9.					
- \	es. Fill in the information below.					
	Facility name and address	Nature of the business operation, including typ the debtor provides	e of services	If debtor provides meals and housing, number of patients in debtor's care		
15.1.	n/a	(Debtor is a home healthcare provider and patients in their homes, exclsuively.)	d treates	patients in debtor 3 care		
		Location where patient records are maintained facility address). If electronic, identify any service p		How are records kept?		
				Check all that apply:		
				■ Electronically□ Paper		
Part 9:	Personally Identifiable Information					
-	-	halds with the tarks were the second				
_		y identifiable information of customers?				
_	No. ∕es. State the nature of the information o	collected and retained				
- \	i es. state the nature of the information o	boliecteu anu retaineu.				

Case 23-03559 Doc 21 Filed 03/30/23 Entered 03/30/23 16:00:45 Desc Main Page 5 of 8 Document Debtor Case number (if known) 23-03559 Absolute Home Health, LLC Medical records and related Does the debtor have a privacy policy about that information? ■ No ☐ Yes 17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit? No. Go to Part 10. Yes. Does the debtor serve as plan administrator? Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units 18. Closed financial accounts Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions. ■ None Financial Institution name and Last 4 digits of Type of account or Date account was Last balance Address account number instrument closed, sold, before closing or moved, or transfer transferred 18.1. **PNC Bank** XXXX-9177 08/2022 \$0.00 Checking 1730 Plainfield Rd. □ Savings Crest Hill, IL 60403 ☐ Money Market □ Brokerage □ Other 19. Safe deposit boxes List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filling this None Does debtor Depository institution name and address Names of anyone with Description of the contents still have it? access to it **Address** 20. Off-premises storage List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business. ■ None Names of anyone with Does debtor Facility name and address Description of the contents still have it? access to it Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own 21. Property held for another List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property. None

Part 12: Details About Environment Information

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Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

Site means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

Hazardous material means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, a	nd proceedings know	n, regardless of when they occurred	d.		
22. Has the debtor been a pa	rty in any judicial or a	dministrative proceeding under any	environmental law? Include settle	ements and orders.	
No.					
☐ Yes. Provide details b	elow.				
Case title Case number		Court or agency name and address	Nature of the case	Status of case	
23. Has any governmental uni environmental law?	t otherwise notified th	e debtor that the debtor may be liab	ole or potentially liable under or in	violation of an	
■ No.□ Yes. Provide details b	elow.				
Site name and address		Governmental unit name and address	Environmental law, if known	Date of notice	
24. Has the debtor notified an	y governmental unit o	f any release of hazardous material	?		
■ No.					
Yes. Provide details b	elow.				
Site name and address		Governmental unit name and address	Environmental law, if known	Date of notice	
Part 13: Details About the D	ebtor's Business or C	Connections to Any Business			
Include this information ever	he debtor was an owne	r, partner, member, or otherwise a per	rson in control within 6 years before	filing this case.	
None					
Business name address D		cribe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.		
			Dates business existed		
26. Books, records, and finan 26a. List all accountants and ☐ None		ntained the debtor's books and record	s within 2 years before filing this cas	se.	
Name and address				ate of service rom-To	
26a.1. KGG LLC 111 N. Ottawa Joliet, IL 6043					
within 2 years before fil		ompiled, or reviewed debtor's books o	f account and records or prepared a	a financial statement	
None					

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

Entered 03/30/23 16:00:45 Case 23-03559 Doc 21 Filed 03/30/23 Desc Main Document Page 7 of 8 Absolute Home Health, LLC Debtor Case number (if known) 23-03559 None Name and address If any books of account and records are unavailable, explain why 26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case. None Name and address 27. Inventories Have any inventories of the debtor's property been taken within 2 years before filing this case? Yes. Give the details about the two most recent inventories. Name of the person who supervised the taking of the Date of inventory The dollar amount and basis (cost, market, or other basis) of each inventory inventory 28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case. Name Address Position and nature of any % of interest, if interest any Stori Worth 370 N. Kinsman Rd. President/owner 100 Seneca, IL 61360 29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions? Nο Yes. Identify below. 30. Payments, distributions, or withdrawals credited or given to insiders Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised? Nο Yes. Identify below. Amount of money or description and value of Name and address of recipient Reason for Dates providing the value property 31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes? Yes. Identify below. Name of the parent corporation Employer Identification number of the parent corporation 32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

Nο

Yes. Identify below.

Name of the pension fund

Employer Identification number of the pension

fund

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Debtor Absolute Home H	ealth, LLC	Case number (d known) 23-03559
Part 14: Signature and Decl	aration	
	cy case can result in fines	faking a false statement, concealing property, or obtaining money or property by fraud in s up to \$500,000 or imprisonment for up to 20 years, or both.
I have examined the informand correct.	ation in this Statement of	Financial Affairs and any attachments and have a reasonable belief that the information is true
I declare under penalty of p	erjury that the foregoing is	s true and correct.
Execute) on March 30, 20	123	
Store Wer	th RN	Stori Worth
Signature of individual signing of	on behalf of the debtor	Printed name
Position or relationship to debto	President	
Are additional pages to Staten	nent of Financial Affairs	for Non-Individuals Filing for Bankruptcy (Official Form 207) attached?
[®] No		
☐ Yes		